PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number 10 1000 171 5038 - 138

CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS				30					RATE	FEE		RATE	FEE
FOR				NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS				3 0 minus 20=		. 10			X\$ 9=	•	OR	X\$18=	180
INI	DEF	ENDENT CLA	IMS	4 min	4 minus 3 =		* 1		X42=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT									+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1004	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
A MENDMENT A		N .	CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	7	otal	* 30	Minus	** 3	O	- Ø		X\$ 9=		OR	X\$18=	
		ndependent	• 4	Minus	***	4	- Ø	1	X42=		OR	X84=	
	1	FIRST PRESE	NTATION OF N	AULTIPLE DEF	PENDE	NT CLAIM	<u> </u>	J	+140=.		OR	+280=	
									TOTAL		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)												
	0 i		CLAIMS REMAINING AFTER AMENDMEN		NL PRE	GHEST JMBER VIOUSLY JD FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
		Total	. 30	Minus	**	30	= Ø		X\$ 9=		OR	X\$18=	
		Independent	. 4	Minus	***	4	= Ø	4	X42=		OF	X84=	·
		FIRST PRESE	NTATION OF	MULTIPLE DE	PENDE	NT CLAIM			+140=		OR	+280=	
١									TOTAL		OF	TOTA	
١			(Column 1	\	(Cc	olumn 2)	(Column	3)	ADDIT. FEE			AUUII. FE	
	AMENDMENT C		CLAIMS REMAINING AFTER AMENDMEN	3	H N PRI	IGHEST LUMBER EVIOUSLY AID FOR	PRESENT EXTRA	7	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
		Total	*	Minus	**				X\$ 9=		OF	X\$18=	
		Independent	*	Minus	***			_	X42=			X84=	
	4	FIRST PRES	ENTATION OF	MULTIPLE DI	EPEND	ENT CLAII	<u> </u>	_	+140=		OF		
		* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									4	TOT	AL .
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1												ADDIT. FI	E L

FORM PTO-875 (Rev. 8/01)

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